

Application Data Sheet

Application Information

Application number::
Filing Date::
Application Type:: Continuation-in-Part
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: Predicting Breast Cancer Treatment Outcome
Attorney Docket Number:: 022041-001420US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mark
Middle Name:: G.
Family Name:: Erlander
Name Suffix::
City of Residence:: Encinitas
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 442 Hillcrest Drive
City of Mailing Address:: Encinitas
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 92024

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Xiao-Jun
Middle Name::
Family Name:: Ma
Name Suffix::
City of Residence:: San Diego
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 4482 Calle Mar De Armonia
City of Mailing Address:: San Diego
State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 92130

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Dennis
Middle Name:: C.
Family Name:: Sgroi
Name Suffix::
City of Residence:: Winchester
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 331 Main Street
City of Mailing Address:: Winchester
State or Province of mailing address:: MA
Country of mailing address::
Postal or Zip Code of mailing address:: 01890

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	29,684	Karen B. Dow
Associate	44,461	Kawai Lau

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
60/504,087	Provisional		09/19/2003
10/727,100	CIP		12/02/2003

Foreign Priority Information

Country::	Application number::	Filing Date::
-----------	----------------------	---------------

Assignee Information

Assignee Name::	Arcturus Bioscience, Inc.
Street of mailing address::	400 Logue Avenue
City of mailing address::	Mountain View
State or Province of mailing address::	CA
Country of mailing address::	USA
Postal or Zip Code of mailing address::	94043